In re:	Sam Khavari et al.		
Case:	P3938	Application No.: 09/653,908	Filing date: 09/01/2000
Art Unit: 2176		Examiner: James H. Blackwell	
Subject:	Method and Apparatus for Providing Automation to an Internet Navigation Application		

Certificate of Transmission under 37 CFR 1.8

Attention: James H. Blackwell , Examiner

Fax No.: (571) 273-8300

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office

on ___07/28/2005___ .
Date

Signature

Sheri Beasley

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Total Sheets Transmitted - 10

1. Amendment Transmittal - 1 sheet
2. Duplicate Amendment Transmittal - 1 sheet
3. Response D - 7 sheets
4. Certificate of Transmission - 1 sheet

Please call (831) 728-1457 if you have any questions.

Method of Transmission: Facsimile   CASE DOCKET NO.   P3938

In reference to application of Sam Khavari et al.

Serial No. 09/653,908

For Method and Apparatus for Providing Automation to an Internet Navigation Application

Sir:
Transmitted herewith is and an amendment in the above-identified application, under 37 C.F.R. 1.312.

☑ No additional fee is required.
☑ Applicant claims Small entity status under 37 CFR 1.27.
☐ The fee has been calculated as shown below.

**** CLAIMS AS AMENDED ****							
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest No. Paid For Previously	(5) Present Extra	(6) Rate Small Entity	(7) Rate Large Entity	(8) Additional Fee
Total Claims	12	Minus	** 21	0	$ 25	$ 50	$ 0.00
Indep Claims	2	Minus	*** 3	0	$ 100	$ 200	$ 0.00
☐ First presentation of a multiple dependent claim					$ 0	$ 0	$ 0.00
☐ Terminal Disclaimer Fees							$ 0.00
Extension Fee	☐ 1st Month		☐ 2nd Month		☐ 3rd Month		$ 0.00
Total additional for claims, time extensions and disclaimer fees							$ 0.00

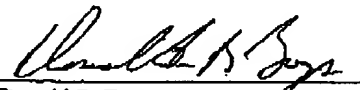** If the "highest Number Previously Paid For" in this space is less than 20, write "20" in this space.
*** If the "highest Number Previously Paid For" in this space is less than 3, write "3" in this space.
**** Multiple dependencies, if any, included in the above calculation.
* If the entry in column 2 is less than the entry in column 4, write "0" in column 5.

☐ A check in the amount of ___0.00___ is attached.

☐ Charge $ ___0.00___ to deposit account ___50-0534___ . (A duplicate of this sheet is enclosed)

☑ Please charge any additional fees or credit overpayment to Deposit Account ___50-0534___ . A duplicate of this sheet is enclosed.

Respectfully Submitted, _____

Donald R. Boys
Reg. No. 35074

Central Coast Patent Agency, Inc.
P.O. Box 187
Aromas, CA 95004
(831) 726-1457

Method of Transmission: Facsimile   CASE DOCKET NO.   P3938

In reference to application of Sam Khavari et al.

Serial No. 09/653,908

For Method and Apparatus for Providing Automation to an Internet Navigation Application

Sir:
Transmitted herewith is and an amendment in the above-identified application, under 37 C.F.R. 1.312.

☑ No additional fee is required.
☑ Applicant claims Small entity status under 37 CFR 1.27.
☐ The fee has been calculated as shown below.

**** CLAIMS AS AMENDED ****

(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest No. Paid For Previously	(5) Present Extra	(6) Rate Small Entity	(7) Rate Large Entity	(8) Additional Fee
Total Claims	12	Minus	** 21	0	$ 25	$ 50	$ 0.00
Indep Claims	2	Minus	*** 3	0	$ 100	$ 200	$ 0.00
☐ First presentation of a multiple dependent claim					$ 0	$ 0	$ 0.00
☐ Terminal Disclaimer Fees							$ 0.00
Extension Fee	☐ 1st Month		☐ 2nd Month		☐ 3rd Month		$ 0.00
Total additional for claims, time extensions and disclaimer fees							$ 0.00

** If the "highest Number Previously Paid For" in this space is less than 20, write "20" in this space.
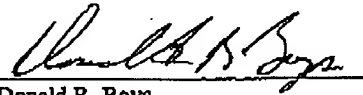*** If the "highest Number Previously Paid For" in this space is less than 3, write "3" in this space.
**** Multiple dependencies, if any, included in the above calculation.
* If the entry in column 2 is less than the entry in column 4, write "O" in column 5.

☐ A check in the amount of ____0.00____ is attached.

☐ Charge $ ___0.00___ to deposit account ___50-0534___. (A duplicate of this sheet is enclosed)

☑ Please charge any additional fees or credit overpayment to Deposit Account ___50-0534___. A duplicate of this sheet is enclosed.

Respectfully Submitted, _____

Donald R. Boys
Reg. No. 35074

Central Coast Patent Agency, Inc.
P.O. Box 187
Aromas, CA 95004
(831) 726-1457

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
Art Unit 2176
Examiner Blackwell, James H.

In Re: Sam Khavari et al.
Case: P3938
Serial No.: 09/653,908
Filed: 09/01/2000
Subject: Method and Apparatus for Providing Automation to an Internet
            Navigation Application

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

Dear Sir:

Response D